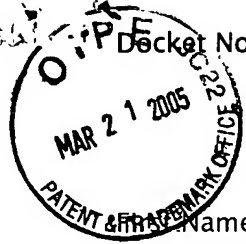


IFW

PATENT



Docket No.: 305378.01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Named Inventor: Shapiro, et al.

Attorney Docket No.: 305378.01

Application No.: 10/786,674

Group Art Unit: 2165

Filed: February 25, 2004

Examiner: POPOVICI, DOV

Customer No.: 22971

Confirmation Number: Not Yet Assigned

Title: SYSTEM-WIDE SELECTIVE ACTION MANAGEMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

STATEMENT FILED PURSUANT TO
THE DUTY OF DISCLOSURE UNDER 37 C.F.R. §§ 1.56, 1.97 AND 1.98

Sir:

Pursuant to the duty of disclosure under 37 C.F.R. §§ 1.56, 1.97 and 1.98, the Applicant requests consideration of this Information Disclosure Statement.

PART I: Compliance with 37 C.F.R. § 1.97

This Information Disclosure Statement has been filed before the mailing date of a first Office Action on the merits in the above-identified case. No fee or certification is required.

PART II: Additional Information

The Applicant hereby makes the following additional information of record in the above-identified application.

The Applicant would like to bring to the Examiner's attention the following co-pending applications that may contain subject matter related to this application:

<u>Serial No.</u>	<u>Filing Date</u>	<u>Inventor(s)</u>
10/656,355	09/05/2003	Matheson, et al.

PART III: Remarks

The Applicant hereby makes of record in the above-identified application the information listed on the attached form PTO/SB/08B. The order of presentation of the references should not be construed as an indication of the importance of the references. Documents cited on the attached form PTO/SB/08B are enclosed unless otherwise indicated. It is respectfully requested that:

1. The Examiner consider completely the cited information, along with any other information, in reaching a determination concerning the patentability of the present claims;
2. The enclosed form PTO/SB/08B be signed by the Examiner to evidence that the cited information has been fully considered by the Patent and Trademark Office during the examination of this application;
3. The citations for the information be printed on any patent which issues from this application.

By submitting this Information Disclosure Statement, the Applicant makes no representation that a search has been performed, of the extent of any search performed, or that more relevant information does not exist.

By submitting this Information Disclosure Statement, the Applicant makes no representation that the information cited in the Statement is, or is considered to be, material to patentability as defined in 37 C.F.R. § 1.56(b).

By submitting this Information Disclosure Statement, the Applicant makes no representation that the information cited in the Statement is, or is considered to be, in fact, prior art as defined by 35 U.S.C. § 102.

Notwithstanding any statement by the Applicant, the Applicant urges the Examiner to form his own conclusion regarding the relevance of the cited information. An early and favorable action is hereby requested.

Respectfully submitted,

MICROSOFT CORPORATION

Date: 3-18-2005

By: Steven J. Spellman

Steven J. Spellman, Reg. No. 45,124
Microsoft Corporation
Redmond, Washington
Telephone (425) 707-9382

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

☒ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) -----.

3-18-2005

Date

Steven J. Spellman

Signature

Steven J. Spellman

Type or Print Name

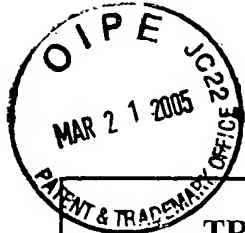
Substitute for form 1449/PTO:				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				Application Number	10/786,674
				Filing Date	02-25-2004
				First Named Inventor	Shapiro, et al.
				Art Unit	2165
				Examiner Name	POPOVICI, DOV
Sheet	1	of	1	Attorney Docket Number	305378.01

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials [*]	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		PREGUICA, NUNO; SHAPIRO, MARC; MATHESON, CAROLINE; "Efficient Semantics-Aware Reconciliation for Optimistic Write Sharing"; Microsoft Corporation, May 2002; title + pages 1-30	<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

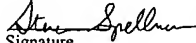
Examiner Signature		Date Considered	
--------------------	--	-----------------	--

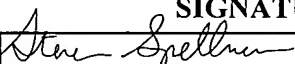
* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional) ² Applicant is to place a check mark here if English language Translation is attached.



TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/786,674
	Filing Date	February 25, 2004
	First Named Inventor	Shapiro, et al.
	Group Art Unit	2165
	Examiner Name	POPOVICI, DOV
<input type="checkbox"/> Sent via Express Mail Label No.:	Attorney Docket Number	305378.01

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s) (sheets)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Declaration <input type="checkbox"/> Newly Executed (pages) <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) (pages)	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Information Disclosure Statement with Form PTO/SB/08B (4 pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Application Data Sheet
CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.8(a)) I hereby certify that this correspondence is being: <input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450; or <input type="checkbox"/> transmitted by facsimile on the date shown below to the USPTO at (703) _____. 3-18-2005 Date  Signature Steven J. Spellman Printed Name	<input checked="" type="checkbox"/> General Power of Attorney (SB80) <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Request for Corrected Filing Receipt <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Copy of (1) IDS cited reference <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 50-0463 for the above identified patent application.		

SIGNATURE OF ATTORNEY OR AGENT					
Signature		Reg. No.	45,124		
Name of Attorney or Agent		Steven J. Spellman			
Date	3-18-2005	Tel.	(425) 707-9382	Facsimile No.	(425) 708-5046
Assignee Name:		MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052			
Customer Number:		22971			